IN THE DISTRICT COURT OF THE UNITED STATES FOR THE MIDDLE DISTRICT OF ALABAMA NORTHERN DIVISION

ARTHUR GLENN ANDERSON, #107331)	
Plaintiff,	
Vs.	CIVIL ACTION NO.2:06-CV-439-WKW
GWENDOLYN MOSLEY, et.al.,	
Defendants.	

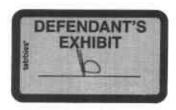
AFFIDAVIT

Before me, the undersigned authority, a Notary Public in and for said County and State of Alabama at Large, personally appeared Tyrone Barrow, who being known to me and being by me first duly sworn, deposes and says under oath as follows:

My name is Tyrone Barrow and I am presently employed as a Classification Specialist, employed by the Department of Corrections, Easterling Correctional Facility, 200 Wallace Drive, Clio, AL 36017. I am over twenty-one (21) years of age.

Inmate Arthur Glenn Anderson's Annual Progress Review was held on 01/17/06. Inmate Anderson was told by Brian Mitchell, Psychological Associate II, that he needed ISAP (8-Week SAP). The plaintiff was also told by Gwendolyn C. Mosley, Warden III and Brian Mitchell, Psychological Associate II, that he would be considered for a transfer to an ISAP (8-Week SAP) when his AA/NA attendance was consistent.

I have included a copy of the Annual Progress Review (Exb. A), along with a copy of the Inmate Interview Record (Exb.B).



Affidavit-Tyrone Barrow Civil Action No.2:06-CV-439-WKW Page 2

Inmate Anderson is not being blackmailed to attend AA/NA. He was recommended to take this program.

I have no control over the Parole Board for inmate Anderson being turned down.

SWORN TO AND SUBSCRIBED TO before me this the 31st day of

Linda E. Deel NOTARY PUBLIC

My Commission Expires: 7-15-07

ALABAMA DEPARTMENT OF CORRECTIONS - PROGRESS REVIEW FORM - JANUARY 12, 2006
AIS #: 00107331B SSN: 426-70-6547 RACE/SEX: W/M DATE OF BIRTH: 11/19/1951
NAME: ANDERSON, ARTHUR CUSTODY: MED2 SECURITY LEVEL: 4 INST: EASTERLING CORRECTIONAL CENT TIME SRVD: 03Y03M10 LAST DISC: 06 09 2005 CRME: THEFT BY DECEPTION I MIN REL DT: 09/20/2007 ACTIVE DET: 0
DISC: FIGHTING WITHOUT A WEAPON PRL CONS: 10/01/2006 EDUCAT LEV: 17
WL/PGM: INST. ASSIGN-3 PRIM OCCUP:LABORER - GENERAL
RECOMMENDED INSTITUTION:EASTERLING RECOMMENDED CUSTODY:MEDIUM
JUSTIFICATION: ANNUAL REVIEW: Multiple Escapee serving a 15 year term for Theft by
deception I (purchased a truck with an insufficient check), Property Theft & CPFI II (rental car
& payroll check per intake-PSI unavailable but requested most recently on 01/11/06 from
Parole Board). Extensive criminal record to include 07/31/72/Escape, 04/10/73/Escape
11/3/80/Escape w/out force from REHF, recaptured same day. No detainers or sex
convictions noted Has SAP needs per Inst. Psych Assoc, but has no consistent AA/NA
attendance. Recommend no changes in custody based on FSC criteria
I GERTIFY ENEMY LEST WAS REVIEWED AND UPPATED: NE COETS (OK) JOSEP STL.
1/17/01 Awe Che 1/17/01
Fully Without 110-06 I William Them 1124/06
PS TCHOLOGIST PS TCHOLOGIST'S ASSOC. DATE CLASSIFICATION COORDINATOR DATE
CENTRAL REVIEW BOARD ACTION
APPROVED DENIED; DIVERTED TO: REASONS:
CRB MEMBER DATE
APPROVED DENIED; DIVERTED TO: REASONS:
CRB MEMBER DATE
APPROVED DENIED; DIVERTED TO: REASONS:
DATE
FINAL DECISION: INST CUSTODY DATE
DATE INMATE INFORMED:INMATE'S SIGNATURE: X TITLE OF THE STATE OF
LAST ACTION: VOSPR REL PENTE (OSTA) DNA OVONB SKILLS: MOTE Maintenance
Nopsychmeds Crush Leg from Kneedown
in Por Rinh. Assoc twarden will looke for 8wK SAP

Filed 06/19/2006 Page 4 of 4

EXHIBIT B

ALABAMA BOARD OF CORRECTIONS DIVISION OF PROFESSIONAL SERVICES INMATE INTERVIEW RECORD

Anders	Mi	Arthur		107331	W	7//	VI/19/1951
NAME: Last	7	First	Middle	Serial No	Race	Sex	DOB: M/D/Y

USE OF FORM: Each interview summary should contain the following material as appropriate: topics discussed; recommendations made by counselor; decisions made by inmate; progress noted or other observations of counselor. All inmates must be advised during the initial interview of the nature and extent of confidentiality in the counseling relationship. Each entry must be dated and signed by the counselor.

NOTE: NO PART OF THIS RECORD IS TO BE DUPLICATED OR EXTRACTED, EITHER IN FACT OR IN SUBSTANCE, WITHOUT THE WRITTEN AUTHORIZATION OF THE INMATE NAMED ABOVE.

DATE OF ENTRY SU	JMMARY OF INTERVIEW	SIGNATURE OF COUNSELOR
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